

In re **Phillip Kenneth Fotherby**
Gail Karen FotherbyCase No. _____
(if known)**SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
66287 Ridgewood Ct, Clarkston, MI 48348 Last sale in area: \$390,000 (last sale was a house in better condition than that of Debtors)	Mortgage	J	\$350,000.00	\$474,900.00
Total:				\$350,000.00

(Report also on Summary of Schedules)

In re **Phillip Kenneth Fotherby**
Gail Karen FotherbyCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash	J	\$200.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Bank of America checking account	J	\$5,000.00
		TCF checking account	J	\$19.00
		Alliance FCU checking account	J	\$5.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video and computer equipment.	X	Home furnishings	J	\$4,000.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		Clothing	J	\$600.00
7. Furs and jewelry.		Jewelry: woman's gold and diamond wedding ring set	W	\$1,000.00
		Jewelry: woman's platinum and diamond ring	W	\$1,000.00
		Jewelry: men's white gold wedding band	H	\$100.00
8. Firearms and sports, photographic, and other hobby equipment.		Ruger .22 pistol	H	\$200.00

In re **Phillip Kenneth Fotherby**
Gail Karen FotherbyCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 1*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X	Term life insurance through Chrysler (no cash surrender value)	H	\$1.00
10. Annuities. Itemize and name each issuer.	X	401(k)	H	\$30,000.00
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorpo- rated and unincorporated businesses. Itemize.	X	Stock portfolio at Ameriprise Financial Services	W	\$2,000.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non- negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			

In re **Phillip Kenneth Fotherby**
Gail Karen FotherbyCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		Anticipated 2014 income tax refund (Debtors owe taxes. No refund anticipated.)	J	\$0.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

In re **Phillip Kenneth Fotherby**
Gail Karen FotherbyCase No. _____
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 3*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Vehicle lease: 2014 Chrysler 300 (no cash surrender value) Vehicle lease: 2014 Chrysler 300 (no cash surrender value)	J J	\$1.00 \$1.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
<u>3</u> continuation sheets attached (Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)				Total > \$44,127.00

In re Phillip Kenneth Fotherby

Case No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

Check if debtor claims a homestead exemption that exceeds
\$155,675.*

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash	11 U.S.C. § 522(d)(5)	\$100.00	\$200.00
Bank of America checking account	11 U.S.C. § 522(d)(5)	\$2,500.00	\$5,000.00
TCF checking account	11 U.S.C. § 522(d)(5)	\$9.50	\$19.00
Alliance FCU checking account	11 U.S.C. § 522(d)(5)	\$2.50	\$5.00
Home furnishings	11 U.S.C. § 522(d)(3)	\$2,000.00	\$4,000.00
Clothing	11 U.S.C. § 522(d)(3)	\$300.00	\$600.00
Jewelry: men's white gold wedding band	11 U.S.C. § 522(d)(4)	\$100.00	\$100.00
Ruger .22 pistol	11 U.S.C. § 522(d)(5)	\$200.00	\$200.00
Term life insurance through Chrysler (no cash surrender value)	11 U.S.C. § 522(d)(7)	\$1.00	\$1.00
401(k)	11 U.S.C. § 522(d)(12)	\$30,000.00	\$30,000.00
Vehicle lease: 2014 Chrysler 300 (no cash surrender value)	11 U.S.C. § 522(d)(2)	\$1.00	\$1.00
Vehicle lease: 2014 Chrysler 300 (no cash surrender value)	11 U.S.C. § 522(d)(2)	\$0.00	\$1.00

* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

\$35,214.00

\$40,127.00

In re Gail Karen Fotherby

Case No. _____
(If known)**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2)
 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds
\$155,675.*

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash	11 U.S.C. § 522(d)(5)	\$100.00	\$200.00
Bank of America checking account	11 U.S.C. § 522(d)(5)	\$2,500.00	\$5,000.00
TCF checking account	11 U.S.C. § 522(d)(5)	\$9.50	\$19.00
Alliance FCU checking account	11 U.S.C. § 522(d)(5)	\$2.50	\$5.00
Home furnishings	11 U.S.C. § 522(d)(3)	\$2,000.00	\$4,000.00
Clothing	11 U.S.C. § 522(d)(3)	\$300.00	\$600.00
Jewelry: woman's gold and diamond wedding ring set	11 U.S.C. § 522(d)(4)	\$1,000.00	\$1,000.00
Jewelry: woman's platinum and diamond ring	11 U.S.C. § 522(d)(5)	\$1,000.00	\$1,000.00
Stock portfolio at Ameriprise Financial Services	11 U.S.C. § 522(d)(5)	\$2,000.00	\$2,000.00
Vehicle lease: 2014 Chrysler 300 (no cash surrender value)	11 U.S.C. § 522(d)(2)	\$0.00	\$1.00
Vehicle lease: 2014 Chrysler 300 (no cash surrender value)	11 U.S.C. § 522(d)(2)	\$1.00	\$1.00

* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

\$8,913.00

\$13,826.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxxxx3263		DATE INCURRED: 03/2005 NATURE OF LIEN: Home Equity Line of Credit COLLATERAL: 6628 Ridgewood Ct., Clarkston, MI 48348 REMARKS:				\$118,900.00	
Chase PO Box 24696 Columbus OH 43224	J	VALUE: \$350,000.00					
ACCT #: xxxxxx2666		DATE INCURRED: 04/2007 NATURE OF LIEN: Purchase Money COLLATERAL: 6628 Ridgewood Ct., Clarkston, MI 48348 REMARKS:				\$356,000.00	\$124,900.00
Provident Funding Assoc PO Box 5914 Santa Rosa CA 95402	J	VALUE: \$350,000.00					

No _____ continuation sheets attached

Subtotal (Total of this Page) >
Total (Use only on last page) >

(Report also on
Summary of
Schedules.) (If applicable,
report also on
Statistical
Summary of
Certain Liabilities
and Related
Data.)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.) **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 Taxes and Certain Other Debts Owed to Governmental Units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 Commitments to Maintain the Capital of an Insured Depository Institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 Claims for Death or Personal Injury While Debtor Was Intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

 Administrative allowances under 11 U.S.C. Sec. 330

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

TYPE OF PRIORITY	Taxes and Certain Other Debts Owed to Governmental Units					
------------------	--	--	--	--	--	--

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND/WIFE/JINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCT #: IRS	J	DATE INCURRED: 2013 CONSIDERATION: 1040 Taxes REMARKS:			\$2,600.00	\$2,600.00	\$0.00

Sheet no. 1 of 1 continuation sheets
attached to Schedule of Creditors Holding Priority Claims

Subtotals (Totals of this page) >

\$2,600.00 \$2,600.00 \$0.00

Total >

\$2,600.00 \$2,600.00 \$0.00

(Use only on last page of the completed Schedule E.
Report also on the Summary of Schedules.)

Totals >

(Use only on last page of the completed Schedule E.
If applicable, report also on the Statistical Summary
of Certain Liabilities and Related Data.)

\$2,600.00 \$2,600.00 \$0.00

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCT #: xxxxxx2603 American Express PO Box 3001, 16 General Warren Blvd Malvern PA 19355	W	DATE INCURRED: 11/2003 CONSIDERATION: Undesignated REMARKS:			\$20,598.00
ACCT #: xxxxxx8274 Bank of America PO Bod 982235 El Paso TX 79998	W	DATE INCURRED: 02/2009 CONSIDERATION: Undesignated REMARKS:			\$6,453.00
ACCT #: xxxxxx5725 Capital One PO Box 30253 Salt Lake City UT 84130	J	DATE INCURRED: 02/1995 CONSIDERATION: Joint Contractual Liability REMARKS:			\$15,598.00
ACCT #: xxxxxx0881 Capital One/Best Buy PO Box 6497 Sioux Falls SD 57117	W	DATE INCURRED: 02/2012 CONSIDERATION: Credit Card REMARKS:			\$1,156.00
ACCT #: xxxxxx7562 Chase PO Box 15298 Wilmington DE 19850	H	DATE INCURRED: 07/2005 CONSIDERATION: Credit Card REMARKS:			\$7,323.00
ACCT #: xxxxxx3586 Chase PO Box 15298 Wilmington DE 19850	H	DATE INCURRED: 04/2007 CONSIDERATION: Credit Card REMARKS:			\$5,189.00
Subtotal >			\$56,317.00		
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)					

1 continuation sheets attached

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCT #: xxxxxx0196 Comenity Bank/Carsons 3100 Easton Square Place Columbus OH 43219	W	DATE INCURRED: 07/2012 CONSIDERATION: Credit Card REMARKS:			\$1,328.00
ACCT #: xxxxxx7520 DSNB Macy's 9111 Duke Blvd Mason OH 45040	W	DATE INCURRED: 06/2006 CONSIDERATION: Credit Card REMARKS:			\$1,115.00
ACCT #: xxxxxx0603 Michigan Catholic Credit Union 255 E. Maple Road Troy MI 48083	H	DATE INCURRED: 01/1999 CONSIDERATION: Credit Card REMARKS: a/k/a Alliance FCU			\$1,786.00
ACCT #: xxxxxx8976 Nordstrom FSB Attn: Account Services PO Box 6566 Englewood CO 80155	W	DATE INCURRED: 09/2012 CONSIDERATION: Credit Card REMARKS:			\$446.00
ACCT #: xxxxxx2754 SYNCB/Art Van Furniture c/o PO Box 965036 Orlando FL 32896	W	DATE INCURRED: 07/2010 CONSIDERATION: Credit Card REMARKS:			\$280.00
Sheet no. <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			Subtotal >		\$4,955.00
			Total >		\$61,272.00
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)					

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases of contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Chrysler Capital PO Box 961275 Fort Worth TX 76161	Vehicle lease 2014 Chrysler 300 Contract to be ASSUMED

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Fill in this information to identify your case:

Debtor 1	Phillip First Name	Kenneth Middle Name	Fotherby Last Name
Debtor 2 (Spouse, if filing)	Gail First Name	Karen Middle Name	Fotherby Last Name
United States Bankruptcy Court for the:		EASTERN DISTRICT OF MICHIGAN	
Case number (if known)			

Check if this is:

- An amended filing
- A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form B 6I**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status**Debtor 1****Debtor 2 or non-filing spouse**

- Employed
- Not employed

- Employed
- Not employed

Occupation**Retired****Retired****Employer's name****Employer's address**

Number Street

Number Street

City State Zip Code

City State Zip Code

How long employed there?**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$0.00	\$0.00
3. Estimate and list monthly overtime pay.	3. + \$0.00	\$0.00
4. Calculate gross income. Add line 2 + line 3.	4. \$0.00	\$0.00

Debtor 1 **Phillip** **Kenneth** **Fotherby** Case number (if known) _____

First Name

Middle Name

Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here ➔	4.	\$0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00
5e. Insurance	5e.	\$0.00
5f. Domestic support obligations	5f.	\$0.00
5g. Union dues	5g.	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00
8b. Interest and dividends	8b.	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00
8d. Unemployment compensation	8d.	\$0.00
8e. Social Security	8e.	\$1,837.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00
8g. Pension or retirement income	8g.	\$1,686.82
8h. Other monthly income. Specify: <u>VA benefit</u>	8h. +	\$130.94
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$3,654.76
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,654.76
	+	\$897.00
		= \$4,551.76
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. +	\$0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.	12.	\$4,551.76
Combined monthly income		
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No. None.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	Phillip First Name	Kenneth Middle Name	Fotherby Last Name
Debtor 2 (Spouse, if filing)	Gail First Name	Karen Middle Name	Fotherby Last Name
United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN			
Case number (if known)			

Check if this is:

- An amended filing
 A supplement showing post-petition chapter 13 expenses as of the following date:

 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
<u>daughter</u>	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
<u>grandchild</u>	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
_____	_____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

4. The rental or home ownership expenses for your residence.

Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues

Your expenses

4. \$1,172.00
 (See continuation sheet(s) for details)

4a. \$400.00
 4b. \$72.17
 4c. _____
 4d. \$99.08

Debtor 1 Phillip First Name Kenneth Middle Name Fotherby Last Name Case number (if known) _____

		<u>Your expenses</u>
5.	Additional mortgage payments for your residence , such as home equity loans	5. _____
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. _____ \$100.00
6b.	Water, sewer, garbage collection	6b. _____ \$100.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ \$217.00
6d.	Other. Specify: _____	6d. _____
7.	Food and housekeeping supplies	7. _____ \$650.00
8.	Childcare and children's education costs	8. _____
9.	Clothing, laundry, and dry cleaning	9. _____
10.	Personal care products and services	10. _____ \$80.00
11.	Medical and dental expenses	11. _____ \$178.33
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ \$433.33
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. _____
14.	Charitable contributions and religious donations	14. _____ \$500.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____
15b.	Health insurance	15b. _____
15c.	Vehicle insurance	15c. _____ \$261.76
15d.	Other insurance. Specify: _____	15d. _____
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. _____
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1 Chrysler lease #1	17a. _____ \$327.59
17b.	Car payments for Vehicle 2 Chrysler lease #2	17b. _____ \$283.19
17c.	Other. Specify: _____	17c. _____
17d.	Other. Specify: _____	17d. _____
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6l).	18. _____
19.	Other payments you make to support others who do not live with you. Specify: _____	19. _____
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a.	Mortgages on other property	20a. _____
20b.	Real estate taxes	20b. _____
20c.	Property, homeowner's, or renter's insurance	20c. _____
20d.	Maintenance, repair, and upkeep expenses	20d. _____
20e.	Homeowner's association or condominium dues	20e. _____

Debtor 1 Phillip Kenneth Fotherby Case number (if known) _____
First Name Middle Name Last Name

21. Other. Specify: See continuation sheet 21. + \$100.00

22. Your monthly expenses. Add lines 4 through 21.
The result is your monthly expenses. 22. \$4,974.46

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$4,551.76

23b. Copy your monthly expenses from line 22 above. 23b. - \$4,974.46

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income. 23c. (\$422.70)

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:

**Home Equity Line of Credit loan to increase from \$300/mo to \$1,100/mo on 03/2015
Payment arrangements needed on 2013-2014 property taxes (\$8,975)**

Debtor 1 Phillip Kenneth Fotherby Case number (if known) _____
First Name Middle Name Last Name

4. The rental or home ownership expense for your residence (details):

Mortgage 1	\$852.92
Mortgage 2	\$319.08
Total:	\$1,172.00

21. Other. Specify:

IRS	\$50.00
Pet expenses (1 dog)	\$50.00
Total:	\$100.00

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
DETROIT DIVISION**

In re **Phillip Kenneth Fotherby**
Gail Karen Fotherby

Case No.

Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$350,000.00		
B - Personal Property	Yes	4	\$44,127.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		\$474,900.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$2,600.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$61,272.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$4,551.76
J - Current Expenditures of Individual Debtor(s)	Yes	4			\$4,974.46
TOTAL		20	\$394,127.00	\$538,772.00	

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF MICHIGAN
DETROIT DIVISION**

In re **Phillip Kenneth Fotherby**
Gail Karen Fotherby

Case No.

Chapter **7**

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$2,600.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$2,600.00

State the following:

Average Income (from Schedule I, Line 12)	\$4,551.76
Average Expenses (from Schedule J, Line 22)	\$4,974.46
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$1,817.76

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$124,900.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$2,600.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$61,272.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$186,172.00

DECLARATION CONCERNING DEBTOR'S SCHEDULES
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 10/26/2014

Signature /s/ Phillip Kenneth Fotherby
Phillip Kenneth Fotherby

Date 10/26/2014

Signature /s/ Gail Karen Fotherby
Gail Karen Fotherby

[If joint case, both spouses must sign.]